		(Column 1)		(Column 2)	(Column 3)
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	•	Minus	••	=
	Independent	•	Minus	441	9
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

" If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

***The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 8/00) OR

OR

OR

RATE

X\$ 9=

X40 =

+135=

TOTAL

TIONAL

FEE

TIONAL

FEE

RATE

X\$18=

X80=

+270=